Nebraska Public Employees Retirement Systems 1221 N Street, Suite 325 P.O. Box 94816

402-471-2053 800-245-5712

Lincoln, NE 68509				F	ax: 402-471-9493
Name Last	First	Middle	Date of Bi	rth	Plan Type (Check One)
Social Security Number		Retirement Number(s)			☐ School ☐ State
Address	City		State	Zip	☐ County ☐ Judges
Home Phone	Work Phone	Emplo	yer		☐ Patrol☐ DCP
	Withholding Cer	tificate for	Annuity Payn	nents	
If you are a new retiree or benefit recipient and do not complete and return this form, we are required to withhold federal and Nebraska state income taxes as if you are a married individual claiming three exemptions.					
NEBRASKA RESIDENTS —Fill out ONLY this section. Check appropriate box.					
A. U I want federal and state income taxes withheld from my periodic annuity payments, based on the exemptions and marital status I claim below:					
Total number of exemptions					
Marital Status: □Single □Married □Married, but withholding at a higher single rate					
OPTIONAL (Fill out ONLY if you choose A) Additional monthly federal withholding \$ (No percentages or fractions) Additional monthly state withholding \$ (No percentages or fractions)					
B. \[\subseteq \text{I do \frac{NOT}{NOT}} \] want federal \(\frac{OR}{OR} \) state income tax withheld.					
C. I do NOT want federal income tax withheld BUT please withhold a FLAT AMOUNT of \$					
for state income tax.					
NON-RESIDENTS OF NEBRASKA—Fill out ONLY this section. Check appropriate box.					
A. I <u>WANT</u> federal income tax withheld from my periodic annuity payments, based on the exemptions and marital status I claim below:					
Total number of ex	emptions				
Marital Status:	□Single □N	Iarried [Married, but witl	hholding at a highe	er single rate
OPTIONAL (Fill out ONLY if you choose A) Additional monthly federal withholding \$ (No percentages or fractions)					
B. \Box I do $\underline{\text{NOT}}$ want federal tax withheld.					
Questions regarding your individual tax liability should be directed to your accountant, the Internal Revenue Service and/or the Nebraska Department of Revenue. The Public Employees Retirement Systems staff are not qualified to answer your personal tax questions.					
IMPORTANT: I realize I am liable for payment of federal income tax on the taxable portion of my annuity and that I may be subject to tax penalties under the estimated tax payment rules if my payment(s) of estimated tax and withholding are not adequate.					
I hereby submit this Withholding Certificate regarding how my benefit is to be treated for purposes of federal and Nebraska state income tax withholding.					
Signature				Date	
NPERS3605 Rev. 03/06					